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Commissioner for Patents
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Alexandria, Virginia 22313-1450

SEP 21 2004

or Fax (703) 746-4000

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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590 06/21/2004

Valerie G Dugan
DUGAN & DUGAN
18 John Street
Tarrytown, NY 10591

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

BRIAN M. DUGAN
[Signature]
9/21/04

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/702,179	10/30/2000	Brian M. Dugan	BMD004	1638

TITLE OF INVENTION: METHODS AND APPARATUS FOR MONITORING AND ENCOURAGING HEALTH AND FITNESS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	09/21/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			

RICHMAN, GLENN E

3764

482-008000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. DUGAN & DUGAN

2. _____

3. _____

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

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- Issue Fee
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- A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1696 (enclose an extra copy of this form).

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(Authorized Signature) *[Signature]* Reg. No. 41,720 (Date) *[Signature]* 9/21/04

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DUGAN & DUGAN

PAGE 01

SEP 21 2004
VALERIE G. DUGAN
BRIAN M. DUGAN

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FACSIMILE COVER SHEET

September 21, 2004

THE ATTACHED DOCUMENT IS BEING SENT VIA FAX ADDRESSED TO:

Mail Stop Issue Fee
Commissioner for Patent
P.O. Box 1450
Alexandria, VA 22313-1450

Fax No.: (703) 746-4000

From: Brian M. Dugan

Docket No. BMD004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re: Inventor: Brian M. Dugan
Title: METHODS AND APPARATUS FOR MONITORING
AND ENCOURAGING HEALTH AND FITNESS
Serial No.: 09/702,179
Filed: October 30, 2000
Examiner: Richman, Glenn E.
Art Unit: 3764
Customer No.: 31647

TOTAL NUMBER OF PAGES INCLUDING THIS PAGE: 4

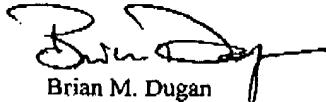
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Facsimile No. 703-746-4000

Date: September 21, 2004

Signature: Brian M. Dugan

Respectfully submitted,


Brian M. Dugan
Registration No. 41,720
(914) 332-9081

* * *

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Docket No. BMD/004

Mail Stop Issue Fee
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P.O. Box 1450
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Re: Inventor: Brian M Dugan
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 Serial No.: 09/702,179
 Filed: October 30, 2000
 Examiner: Richman, Glenn E.
 Group Art Unit: 3764
 Customer No.: 31647

Transmitted herewith is:

- Issue Fee Transmittal.
- Fee Address Indication Form.
- Fax cover sheet with Transmittal.

FEE CALCULATION					
Fee Items	Claims Filed	Included With Basic Fee	Extra Claims	Fee Rate	Total
Total Claims	N/A	- 20 =		X \$18.00	\$0.00
Independent Claims	N/A	- 3 =		X \$86.00	\$0.00
Basic Filing Fee				\$770.00	\$0.00
TOTAL FEES					\$0.00

- The Commissioner is hereby authorized to charge \$665.00 (small entity) to Deposit Account No. 04-1696.
- The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 04-1696. A duplicate copy of this transmittal is enclosed.
- Please address all future correspondence to: **Customer # 31647**
Dugan & Dugan, PC
55 South Broadway
Tarrytown, NY 10591

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